

| POSITION                  | INITIALS   | ID NO.       | DATE           |
|---------------------------|------------|--------------|----------------|
| FEE DETERMINATION         | <i>BPA</i> | <i>20381</i> |                |
| O.I.P.E. CLASSIFIER       |            | <i>48</i>    | <i>6/28/00</i> |
| FORMALITY REVIEW          |            | <i>21423</i> | <i>7-9-00</i>  |
| RESPONSE FORMALITY REVIEW |            |              |                |

# INDEX OF CLAIMS

|                     |            |   |              |
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| ✓                   | Rejected   | N | Non-elected  |
| =                   | Allowed    | I | Interference |
| — (Through numeral) | Canceled   | A | Appeal       |
| ÷                   | Restricted | O | Objected     |

| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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